Case 2:06-cy-0026 SENDER: COMPLETE THIS SECTION OCUMENTS SENDER: COMPLETE THIS SECTION OCUMENTS Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to:	A. Signature
Bob Riley, Gov.	10 CV 50 0+0
11 S. Union Street	CANAL LA
Montgomery, AL 36130	3. Service Type Certified Mail Registered Insured Mail C.O.D. 4. Restricted Delivers (C.O.D.) 1 Yes
Z. Altiolo	102595-02-M-1540
(Transfer from service	Return Receipt
PS Form 3811, February 2004	